## ND30000009118

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(Ac	ldress)			
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## **COVER LETTER**

	(Name of Corporation)
DOCUMENT NUMBER: N03000009	9718
The enclosed Resignation of Registered A	gent for a Corporation and fee are submitted for filing
Please return all correspondence concerning	ng this matter to the following:
(Name of Person)	<del></del>
Leland Management	
(Name of Firm/Company)	
6972 Lake Gloria Boulevard	
(Address)	<del></del>
Orlando, FL 32809	
(City/State and Zip Code)	
For further information concerning this ma	atter, please call:
Romary Henriquez	at (407) 982-2866 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisio	ns of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,	,	
Florida Statutes, the unc	ersigned, Le	land Management		
,	<i>y</i>	(Name of Registered Agent)		
hereby resigns as Registered Agent for		Coral Trace Homeowners Association of Volusia		
		(Name of Corporation)	· · · · · · · · · · · · · · · · · · ·	
N03000009718				
(Document Number	, if known)	<del></del>		
A copy of this resignation	on was mailed to	the above listed corporation at its last known ac	ldress.	
The agency is terminate this statement is filed.	d and the office	discontinued on the 31st day after the date on what	iich	
	(Sig	gnature of Resigning Agent)		
If signing on behalf of a	n entity:			
Reb	ecca Furlow		<b>*</b>	
	(	Typed or Printed Name)	易錦	
			1 557	
Age	nt		- CONT.	
		(Capacity)	BE GE WH	

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Fee for filing this document: